

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of Sitke AYGEN Confirmation No. 1732

Application No. 10/532,348 Art Unit 3735

Filed July 20, 2005 Examiner Navin Natnithithadha

For: METHOD FOR DETERMINING GASTRIC EMPTYING

TRANSMITTAL

Mail Stop AF
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith please find:

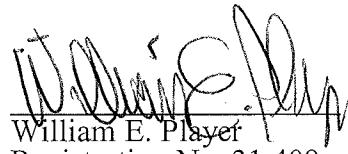
- Notice of Appeal, Pre-Appeal-Brief Request for Review
- Petition for extension of time
- Fee payment Payment Form PTO-2038 (credit card) for \$825 is attached.
- Charge \$ * to Deposit Account No. 06-1358.
- Small entity status established in connection with the subject application.

Fee Calculation					
Excess Claims					
	Nº of Claims	Highest Nº Paid For	Excess Claims	Small Entity Fee	Large Entity Fee
<i>Total</i>	*	⊖ * =	0	⊖ \$26 = \$	⊖ \$52 = \$
<i>Ind.</i>	*	⊖ * =	0	⊖ \$110 = \$	⊖ \$220 = \$
() Multiple Dependent Claims (1 st Filing)			⊕ \$195 =	⊕ \$390 =	\$
Excess Claims Fee				\$	\$
Extension of Time Fee				\$555	\$
Other: Notice of Appeal				\$270	\$
Total Fee Due				\$825	\$0

- If a petition for extension of time is necessary, but not enclosed, then this acts as the petition. Charge any fees additionally necessary in connection herewith to Deposit Account No. 06-1358.

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 Date: March 2, 2011

By



William E. Player
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